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Bib Data Sheet

CONFIRMATION NO. 3888

|  |   |   |   |  |                                |
|--|---|---|---|--|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/751,251   | <b>FILING OR 371(c) DATE</b><br>12/30/2003<br><b>RULE</b>   | <b>CLASS</b><br>375                                 | <b>GROUP ART UNIT</b><br>2611   | <b>ATTORNEY DOCKET NO.</b><br>2080-3-213 |                                |
| <b>APPLICANTS</b><br>Jung Sig Jun, Gyeonggi-do, KOREA, REPUBLIC OF;  |   |   |   |  |                                |
| ** CONTINUING DATA *****<br>N/A  |   |   |   |  |                                |
| ** FOREIGN APPLICATIONS *****<br>REPUBLIC OF KOREA P2002-86868 12/30/2002  |   |   |   |  |                                |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br>** 05/04/2004  |   |   |   |  |                                |
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no   |   | <b>STATE OR COUNTRY</b><br>KOREA,<br>REPUBLIC<br>OF | <b>SHEETS DRAWING</b><br>6  | <b>TOTAL CLAIMS</b><br>15                | <b>INDEPENDENT CLAIMS</b><br>3 |
| 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met |   |   |   |  |                                |
| Verified and Acknowledged  |   | Examiner's Signature                                | Initials  |  |                                |
| <b>ADDRESS</b><br>35884  |   |   |   |  |                                |
| <b>TITLE</b><br>Carrier recovery device of digital TV receiver   |   |   |   |  |                                |
| <b>FILING FEE RECEIVED</b><br>770  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |   | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |                                |